UNITED TATES OF AMERICA COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION				0FGS FILE NO. P//878-173	
As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated below next to my name; that I verily believe that I am the original, first and sole inventor (if only one name is listed below) or a joint inventor (if plural inventors are named) of the subject matter which is claimed and for which a patent is sought on the invention entitled:  VARIABLE RESOLUTION DECODER					
the specification of which is attached hereto, unless the following box is checked:  was filed on as United States patent Application Number or PCT International patent Number and was amended on (if any).					
I hereby state that I have reviewed amendment referred to above. I acknowledge the duty to disclose Regulations, §1.56. I hereby claim priority benefits und United States provisional application(s) having a filing date before that of the apprior Foreign or Provisional Application	and understand the all information kno ler Title 35, United listed below and ha pplication on which	contents of the above ide wn to be material to pate States Code §119 of any ave also identified below	entified specification, ntability in accordance	e with Title 37	claims, as amended by any
COUNTRY		APPLICATION NUMBER DATE OF			PRIORITY CLAIMED UNDER 35 U.S.C. 119
Japan	2000-296	434	28,09,		YES X NO
					YES NO
	-				YES NO
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Chide of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.					
UNITED STATES APPLICATION NUMBER		DATE OF FILING (day, month, year)		STATUS (patented, pending, abandoned)	
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hereby appoint OSTROLENK, FABER, GERB & SOFFEN, and the members of the firm, Marvin C. Soffen - Reg. No. 17,542; Samuel H. Weiner - Reg. No. 18,510; Jerome M. Berliner - Reg. No. 18,653; Robert C. Faber - Reg. No. 24,322; Edward A. Meilman - Reg. No. 24,735; Stanley H. Lieberstein - Reg. No. 22,400; Steven I. Weisburd - Reg. No. 27,409; Max Moskowitz - Reg. No. 30,576; Stephen A. Soffen - Reg. No. 31,063; James A. Finder - Reg. No. 30,173; William O. Gray, III - Reg. No. 30,944 and Louis C. Dujmich - Reg. No. 30,625, as attorneys with full power of substitution and revocation to prosecute this application, to transact all business in the Patent & Trademark Office connected therewith and to receive all correspondence.					
SEND CORRESPONDENCE TO:	OSTROLENK, FABER, GERB & SOFFEN 1180 AVENUE OF THE AMERICAS NEW YORK, NEW YORK 10036-8403  DIRECT TELEPHONE CALLS TO: (212) 382-0700				
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
FULL NAME OF SOLE OR FIRST INVENTOR TOTU YAMADA		INVENTOR'S SIGNATUR		(出)	July 18, 2001
RESIDENCE		· June	1	COUNTRY OF	
Tokyo, Japan				Japan	
c/o NEC Corporation, 7-1, Shiba 5-chome, Minato-ku, Tokyo, Japan					
FULL NAME OF SECOND JOINT INVENTOR (IF ANY) . INVENTOR'S SIGNATURE					DATE
RESIDENCE				COUNTRY OF CITIZENSHIP	
POST OFFICE ADDRESS	· :				
FULL NAME OF THIRD JOINT INVENTOR (IF	INVENTOR'S SIGNATURE			DATE	
RESIDENCE			COUNTRY OF CITIZENSHIP		
POST OFFICE ADDRESS					
CONTINUED ON PAGE 2					